PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/698,804			ing Date 31/2003	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
Н	FOR	T N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	T .	RATE (\$)	FEE (\$)	
×	BASIC FEE (37 CFR 1.16(a), (b), (c)	_	N/A	LD NO	N/A		N/A	1 LL (0)	i	N/A	770	
	SEARCH FEE (37 CFR 1.16(k), (i), (ii)		N/A		N/A		N/A		1	N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p), (Ε	N/A		N/A		N/A		1	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =				x \$ =		OR	x s =		
INE	EPENDENT CLAIM CFR 1.16(h))	s	minus 3 = *				x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawings exce sheets of paper, the application size to is \$250 (\$125 for small entity) for eac additional 50 sheets or fraction therec 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.									
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))]			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL	770	
	APPI	OED - PART II	_	OTHER THAN SMALL ENTITY OR SMALL ENTITY								
AMENDMENT	06/08/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18())	• 43	Minus	~ 5 3	= 0]	x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 13	Minus	···16	= 0	1	x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,160))		Minus			1	x \$ =		OR	x \$ =		
	Independent (37 CFR 1,16(h))		Minus	***]	x \$ =		OR	x s =		
ä	Application Size Fee (37 CFR 1.16(s))]]			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
									OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write '70' in column 3. "If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.												

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